THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

			Return to:	
STATEMENT OF ACCOUNT	FOR COPYRIGH	Library of Congress Copyright Office		
for Secondary Transmissions by	DATE RECEIVED	AMOUNT	Licensing Division	
Cable Systems (Short Form)			101 Independence Ave. SE	
General instructions are at the	00/07/0010	\$	Washington, DC 20557-6400 (202) 707-8150	
end of this form [pages (i)-(vii)].	02/27/2019	ALLOCATION NUMBER	For courier deliveries, see page ii of the general instructions	

A	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:						
Accounting Period	July 1-December 31, 2018							
B _{Owner}	Instructions: Your file has been established under the information given below. If there are any changes, draw a line through the incorrect information and print or type the correct information beside it. Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division. 028745							
	LEGAL NAME OF OWNER/MAILING ADI	DRESS OF CABLE SYSTEM						
	Vyve Broadband J, LLC							
	02874520182							
	028745 2018/2							
	Four International Drive, Suite 330 Rye Brook, NY 10573							
С			ntify the business and operation of the systen e system, if different from the address given					
System	1 IDENTIFICATION OF CABLE SYSTEM:							
	MAILING ADDRESS OF CABLE SYSTEM: 2804B FM 51 South 2 (Number; street, rural route; apartment, or suite number)							
	Decatur TX 76234 (City, town, state, zip code)							
	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined							
D			uding unincorporated communities within unit					
			6.5(dd). The first community that list will serv					
Area Served	,		use it as the first community on all future filing or mobile home parks should be reported in p	•				
Serveu	the identified city.		i mobile nome parks should be reported in p	aratheses below				
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
First	Bowie	ТХ						
Community								
form in order to pro- numbers. By provid search reports prep	cess your statement of account. PII is any persona ing PII, you are agreeing to the routine use of it to	al information that can be used to identify or establish and maintain a public record, whic e PII requested is that it may delay processi	e personally identifying information (PII) requested on th trace an individual, such as name, address and telepho h includes appearing in the Offce's public indexes and ir ng of your statement of account and its placement in the would be made by a court of law.	ne n				

Form SA1-2c Rev 04/2011

•-	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:										аз. раде 2 Г ЕМ ID #
Name	Vyve Broadband J, LLC										(028745
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space L call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged tor each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate											
	category, but do not include discounts allowed for advance payment. BIOCK 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: It your cable system has rate categories for secondary transmissions service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient. BLOCK 1 BLOCK 1											
	BLC	BLOCK 2										
	NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY OF SER							D	VICE	NO. OF	26	RATE
	Residential:	SUBSCRIB	EKS	RAIE		CATE	GORT OF SE	R	VICE	SUBSCRIBEI	10	RATE
	Service to first set		127	25.00								
	Service to additional set(s)							••••				
	• FM radio (if separate rate)							••••				
	Motel, hotel		20	25.00				••••				
	Commercial											
	Converter											
	Residential											
	Non-residential											
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or othered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.											
		BLO								BLOCK	2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	RVI	CE	RATE		CATEGO	RY OF SERV		RATE
	Continuing Services:	=		ation: Non-res								
	• Pay cable	19.95	• Mo	tel, hotel			T&M					
	• Pay cable—add'l channel	15.95	۰Co	mmercial			T&M					
	 Fire protection 	N/A	•Pa	y cable			T&M					
	 Burglar protection 	N/A	•Pa	y cable-add'l ch	har	nnel	T&M					
	Installation: Residential		• Fire	e protection			N/A					
	First set	59.99	• Bu	rglar protection	ı		N/A					
	 Additional set(s) 	19.99	Other	services:								
	 FM radio (if separate rate) 	N/A	•Re	connect			29.99					
	Converter			sconnect								
			•Ou	tlet relocation			29.99					

Move to new address

29.99

.....

carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F • Do not list the statio station was carried • List the station here basis. For further i Column 1: List ea Column 2: Give tt This may be different associated with a stat the same on the form Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: Give tt	TTERS: TELEVISION are G, identify every televi- le system during the acc alations in effect on June .76.61(e)(2) and (4), or basis, as explained in this s Stations: With respect FCC rules, regulations, ion here in space G—bu- ed only on a substitute breve ere, and also in space I, if r information concerning each station's call sign. I the number of the channel the number of the channel on w tation according to its ow m. ate in each case whether by entering the letter "N ulticast), "E" (for noncom these terms, see page (the location of each stat or Canadian stations, if a 2. B'CAST CHANNEL NUMBER 2	224, 1981, permitting 76.63 (referring to 76 re next paragraph. ct to any distant status or authorizations: ut do list it in space I pasis. f the station was carr g substitute basis sta Do not report originai nel on which the station which your cab;e syst rer-thje-air designation er the station is a net I" (for network), "N-N immercial educational) iv) of the general ins tion. For U.S. station	ns, list the community to which the station is licensed by the of the community with which the station is identifed.
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F • Do not list the statio station was carried • List the station here basis. For further i Column 1: List ea Column 2: Give tf This may be different associated with a stat the same on the form Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: Give tf FCC. For Mexican or 1. CALL SIGN KDTN-DAYSTAR KFDX-NBC KAUZ-CW KAUZ-CBS KSWO-ABC KJTL-FOX	2. B'CAST CHANNEL NUMBER	24, 1981, permitting 76.63 (referring to 76 re next paragraph. ct to any distant statu or authorizations: ut do list it in space I pasis. If the station was carr g substitute basis sta Do not report original nel on which the stati which your cab;e syst rer-thje-air designation er the station is a net I" (for network), "N-M mercial educational) iv) of the general ins tion. For U.S. station any, give the name of 3. TYPE OF STATION	ept (1) stations carried only on a part-time basis under g the carriage of certain network programs [sections 6.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ried both on a substitute basis and also on some other titons, see page (v) of the general instructions. tion program services such as HBO, ESPN, etc. tion's broadcasts are carried in its own community. tem carried the station. Identify each multicast stream on. For example, report multicast stream "WETA-2" as twork station, an independent station, or a noncommercial 0" (for network multicast), "I" (for independent), "I-M"), or "E-M" (for noncommercial educational multicast). structions. ns, list the community to which the station is licensed by the of the community with which the station is identifed. 6. LOCATION OF STATION
carried by your cable FCC rules and regula 76.59(d)(2) and (4), 7 substitute program ba Substitute Basis basis under specifc F • Do not list the station station was carried • List the station here basis. For further i Column 1: List ea Column 2: Give tt This may be different associated with a stat the same on the form Column 3: Indicat educational station, b (for independent mult For the meaning of th Column 4: Give tt FCC. For Mexican or 1. CALL SIGN KDTN-DAYSTAR KFDX-NBC KAUZ-CW KAUZ-CW KAUZ-CBS KSWO-ABC	le system during the acc ilations in effect on June 76.61(e)(2) and (4), or basis, as explained in th s Stations: With respec FCC rules, regulations, ion here in space G—bu ed only on a substitute t re, and also in space I, ii r information concerning each station's call sign. I the number of the chan nt from the channel on v tation according to its ov m. ate in each case whether by entering the letter "N ulticast), "E" (for noncom these terms, see page (the location of each sta or Canadian stations, if a 2. B'CAST CHANNEL NUMBER 2	24, 1981, permitting 76.63 (referring to 76 re next paragraph. ct to any distant statu or authorizations: ut do list it in space I pasis. If the station was carr g substitute basis sta Do not report original nel on which the stati which your cab;e syst rer-thje-air designation er the station is a net I" (for network), "N-M mercial educational) iv) of the general ins tion. For U.S. station any, give the name of 3. TYPE OF STATION	ept (1) stations carried only on a part-time basis under g the carriage of certain network programs [sections 6.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ried both on a substitute basis and also on some other titons, see page (v) of the general instructions. tion program services such as HBO, ESPN, etc. tion's broadcasts are carried in its own community. tem carried the station. Identify each multicast stream on. For example, report multicast stream "WETA-2" as twork station, an independent station, or a noncommercial 0" (for network multicast), "I" (for independent), "I-M"), or "E-M" (for noncommercial educational multicast). structions. ns, list the community to which the station is licensed by the of the community with which the station is identifed. 6. LOCATION OF STATION
1. CALL SIGN KDTN-DAYSTAR KFDX-NBC KAUZ-CW KAUZ-CBS KSWO-ABC KJTL-FOX	2. B'CAST CHANNEL NUMBER 2	3. TYPE OF STATION	6. LOCATION OF STATION
KFDX-NBC KAUZ-CW KAUZ-CBS KSWO-ABC	2		
KFDX-NBC KAUZ-CW KAUZ-CBS KSWO-ABC			DENTON TX
KAUZ-CW KAUZ-CBS KSWO-ABC	3	N	WICHITA FALLS TX
KAUZ-CBS KSWO-ABC KJTL-FOX	6.2	I-M	WICHITA FALLS TX
KJTL-FOX	6	N	WICHITA FALLS TX
KJTL-FOX	7	N	LAWTON TX
	10	I	WICHITA FALLS TX
KERA-PBS	13	E	DALLAS TX
ĸswo	7.3	I-M	LAWTON TX
KPXD (ION)	68	I	DALLAS TX
KPXD	68.2	I-M	DALLAS TX
KDTX (TBN)	45	I	Dallas
KSWO KPXD (ION KPXD	1)	7.3 1) 68 68.2	7.3 I-M 1) 68 I 68.2 I-M

.....

.....

.....

.....

ACCOUNTING PERIOD: 2018/2

FORM SA1-2. F LEGAL NAME O		CABLE SY	YSTEM:				SYSTEM ID#	IG PERIOD: 2018/	
Vyve Broad							028745		
		D 4 5 1 5							
In General: Lis	RIMARY TRANSMITTERS: RADIO General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an -band basis whose signals were "generally receivable" by your cable system during the accounting period.								
receivable if (1)	Decial Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally ceivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals.								
For detailed info Column 1: lo	ormation abou dentify the call	t the the sign of e	Copyright Office regulations of each station carried. n is AM or FM.						
Column 3: If	the radio stat	ion's sigr	nal was electronically process mark in the "S/D" column.	ed by the cable sy	/stem as a se	parate a	nd discrete		
Column 4: G	Give the station	n's locatio	on (the community to which th the community with which the			C or, in th	ne case of		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION		

FORM SA1-2. PAGE 5.

Name	LEGAL NAME OF OWNER OF (Vyve Broadband J, LL(SUBSTITUTE CARRIAGE		ΓEM:					SYSTEM ID#
I								
I :	SUBSTITUTE CARRIAGE							028745
Special Statement and Program Log	In General: In space I, identif substitute basis during the ac explanation of the programmi 1. SPECIAL STATEMENT • During the accounting peri- broadcast by a distant stat Note: If your answer is "No" log in block 2. 2. LOG OF SUBSTITUTE In General: List each substic clear. If you need more space Column 1: Give the title of period, was broadcast by a of	fy every nor counting pe ng that mus CONCER od, did you ion? , leave the PROGRA tute progra ce, please a of every nor	nnetwork televis riod, under spe it be included in NING SUBST r cable system rest of this pag MS m on a separa attach additionan nnetwork telev	sion program broadcast by a cific present and former FC this log, see page (v) of the FITUTE CARRIAGE carry, on a substitute basi ge blank. If your answer is te line. Use abbreviations of al pages. ision program (substitute p	a distant static C rules, regula general instr s, any nonnet Yes," you mu wherever pos rogram) that,	ations, or autho uctions. twork televisio ist complete th sible, if their m during the acc	n program Yes ne program ne program neaning is counting	carried on a for a further
	under certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. I Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Cana Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. I stated as "6:00–6:30 p.m."	gulations, o es like "mo Bulls." n was broad sign of the s dcast static adian statio th and day e "5/7." s when the Example: a er "R" if the nd regulatic	r authorizations vies" or "baske dcast live, ente station broadca n's location (tr ns, if any, the when your sys substitute pro program carrie listed program ons in effect du	s. See page (v) of the gene tball." List specific program r "Yes." Otherwise enter "N isting the substitute progra le community to which the community with which the tem carried the substitute p gram was carried by your of ed by a system from 6:01:" was substituted for progra ring the accounting period	eral instruction n titles, for exa m. station is lice station is lice orogram. Use cable system. 5 p.m. to 6:2 mming that y center the let under FCC n	ns for further in ample, "I Love nsed by the F(tified). numerals, wit List the times 8:30 p.m. shou our system wa ter "P" if the lis ules and regul	nformation. Lucy" or CC or, in h the month accurately uld be as required sted pro ations in	1
			E PROGRAM	1		BSTITUTE C OCCURRED		7. REASON
			3. STATION'S		5. MONTH	6. TIN		FOR DELETION
_	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM —	то	

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Vyve Broadband J, LLC	028745	
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. If all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary tran (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	smission service s amount, see 25,707.50	K Gross Receipts
IMPORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)	
 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions for more information. 	\$263,800	L Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for accounting period is \$52.00	or this six-mont	
Line 1. Royalty fee for accounting period	\$ 52.00	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2	\$ 52.00	
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,	100)	
1. Base amount under statutory formula \$ 263,800.00		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
4. Enter the amount of gross receipts from space K		
5. Enter the amount from line 3		
6. Subtract line 5 from line 4		
7. Multiply line 6 by .005 (enter figure here)		
8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	7,600)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01		
5. Royalty due on the first \$263,800 of gross recepits (under statutory formula)	1,319.00	
6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See general instructions for more information.	page I of the	

FORM SA1-2. PAGE 6.

		FORM SA1-2. PAGE 7						
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028745						
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	stations						
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	11						
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	140						
N Individual to	we can write or call about this statement of account.) ual to tacted rther Name Marie Censoplano Telephone 914-234-8313 ation							
Be Contacted for Further Information								
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip)							
	Email (optional) Fax (optional)							
O Certifcation	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations as explained in the general instructions.) ion • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B; or (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the cable system in line 1 of space B.							
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact conta are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith [18 U.S.C., Section 1001(1986)]	ined herein						
	Handwritten signature: /s/ Daniel J. White							
	Typed or printed name: Daniel J. White							
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)							
	Date:							

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2018/2

FORM	SA1-2.	PAGE	8.
------	--------	------	----

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Nomo
Vyve Broadband J, LLC 028745	Name
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address	-
INTEREST ASSESSMENTS	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) reque	sted on th

form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.